

TITLE V BLOCK GRANT APPLICATION
FORMS (1-21)
STATE: TN
APPLICATION YEAR: 2006

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APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/15/2005	APPLICANT IDENTIFIER 1-62-600-1445-D
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction		4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER
Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction			
5. APPLICANT INFORMATION			
Legal Name: Tennessee Department of Health		Organizational Unit: Maternal and Child Health	
Address (give city, county, state and zip code) 425 5th Avenue North 5th Floor Cordell Hull Bldg. Nashville, TN 37247 County: Davidson		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Theodora Pinnock, M.D. Tel Number: 615-741-7353	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">2</div><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">1</div><div style="border: 1px solid black; padding: 2px 5px;">4</div><div style="border: 1px solid black; padding: 2px 5px;">4</div><div style="border: 1px solid black; padding: 2px 5px;">5</div></div>		7. TYPE OF APPLICANT: (Enter appropriate letter in box) A A. State H. Independent School District B. County I. State Controlled Institution of Higher Learning C. Municipality J. Private University D. Township K. Indian Tribe E. Interstate L. Individual F. Intermunicipality M. Profit Organization G. Special District N. Other (Specify)	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: Health Resources and Services Administration, Maternal and Child Health Bureau	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">4</div></div> TITLE: Maternal and Child Health Services Block Grant		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Maternal and Child Health Services	
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): Statewide			
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date: 10/01/2005	Ending Date: 09/30/2006	a. Applicant 5th District	b. Project Districts 1-9
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$ <u>12,349,717.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$ <u>9,000,000.00</u>		
c. State	\$ <u>13,250,000.00</u>		
d. Local	\$ <u>0.00</u>		
e. Other	\$ <u>0.00</u>		
f. Program Income	\$ <u>5,000,000.00</u>		
g. TOTAL	\$ <u>39,599,717.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Typed Name of Authorized Representative Kenneth S. Robinson, M.D.		b. Title Commissioner	c. Telephone Number 615-741-3111
d. Signature of Authorized Representative		e. Date Signed	

FORM 2
MCH BUDGET DETAILS FOR FY 2006

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: TN

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 12,349,717

A.Preventive and primary care for children:

\$ 3,704,916 (30%)

B.Children with special health care needs:

\$ 3,704,916 (30%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 1,234,971 (10%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 9,000,000

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 13,250,000

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 0

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 5,000,000

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 13,125,024

\$ 18,250,000

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 39,599,717

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 0

d. Abstinence Education: \$ 993,367

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 0

j. Education: \$ 0

k. Other: \$ 0

CHAD \$ 717,336

CISS-SECCS \$ 100,000

Family Planning \$ 5,979,357

Hearing Screening \$ 150,000

Lead \$ 602,929

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 8,642,989

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 48,242,706

FORM NOTES FOR FORM 2
None
FIELD LEVEL NOTES
None

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: TN

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$ 12,693,368	\$ 14,892,660	\$ 12,693,368	\$ 0	\$ 12,349,717	\$ 0
2. Unobligated Balance (Line2, Form 2)	\$ 12,731,880	\$ 0	\$ 9,000,000	\$ 0	\$ 9,000,000	\$ 0
3. State Funds (Line3, Form 2)	\$ 13,322,400	\$ 13,250,000	\$ 13,450,000	\$ 0	\$ 13,250,000	\$ 0
4. Local MCH Funds (Line4, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds (Line5, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income (Line6, Form 2)	\$ 6,000,000	\$ 4,783,502	\$ 6,000,000	\$ 0	\$ 5,000,000	\$ 0
7. Subtotal (Line8, Form 2)	\$ 44,747,648	\$ 32,926,162	\$ 41,143,368	\$ 0	\$ 39,599,717	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds (Line10, Form 2)	\$ 9,220,986	\$ 8,802,718	\$ 9,040,314	\$ 0	\$ 8,642,989	\$ 0
9. Total (Line11, Form 2)	\$ 53,968,634	\$ 41,728,880	\$ 50,183,682	\$ 0	\$ 48,242,706	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: TN

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,453,189	\$ 8,615,225	\$ 12,453,189	\$ 9,302,321	\$ 12,731,879	\$ 12,735,917
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 1,580,538	\$ 0	\$ 4,748,270	\$ 0	\$ 12,453,186	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 13,250,000	\$ 13,500,000	\$ 13,500,000	\$ 13,322,400	\$ 13,500,000	\$ 13,450,000
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 5,000,000	\$ 5,187,110	\$ 6,000,000	\$ 5,121,070	\$ 6,000,000	\$ 5,142,601
7. Subtotal <i>(Line8, Form 2)</i>	\$ 32,283,727	\$ 27,302,335	\$ 36,701,459	\$ 27,745,791	\$ 44,685,065	\$ 31,328,518
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 3,577,733	\$ 2,336,935	\$ 4,366,920	\$ 2,704,466	\$ 3,190,351	\$ 8,956,743
9. Total <i>(Line11, Form 2)</i>	\$ 35,861,460	\$ 29,639,270	\$ 41,068,379	\$ 30,450,257	\$ 47,875,416	\$ 40,285,261
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was estimated.
2. **Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2003
Field Note:
Entire grant was carried forward.
3. **Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was estimated.
4. **Section Number:** Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount was over estimated.
5. **Section Number:** Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was over estimated.
6. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2003
Field Note:
Line 8 -New amount of \$8,955,536 includes the family planning grant as per federal staff. We were told we needed to include the family planning grant in budgeted and expended amounts.

Line 9 - Total should be \$53,640,601.
7. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2004
Field Note:
Budgeted amounts were estimated.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: TN

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,745,158	\$ 2,107,274	\$ 2,674,319	\$ 0	\$ 2,534,382	\$ 0
b. Infants < 1 year old	\$ 7,472,857	\$ 4,675,515	\$ 5,718,928	\$ 0	\$ 5,623,160	\$ 0
c. Children 1 to 22 years old	\$ 14,229,752	\$ 11,074,904	\$ 12,055,007	\$ 0	\$ 13,345,105	\$ 0
d. Children with Special Healthcare Needs	\$ 8,636,296	\$ 5,771,395	\$ 8,187,530	\$ 0	\$ 6,929,950	\$ 0
e. Others	\$ 10,873,679	\$ 8,132,762	\$ 9,915,552	\$ 0	\$ 9,781,130	\$ 0
f. Administration	\$ 1,789,906	\$ 1,164,312	\$ 2,592,032	\$ 0	\$ 1,385,990	\$ 0
g. SUBTOTAL	\$ 44,747,648	\$ 32,926,162	\$ 41,143,368	\$ 0	\$ 39,599,717	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 130,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 200,600		\$ 50,000		\$ 0	
d. Abstinence Education	\$ 1,067,568		\$ 1,014,610		\$ 993,367	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 0		\$ 0		\$ 0	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
CHAD	\$ 1,098,700		\$ 717,300		\$ 717,336	
CISS-SECCS	\$ 0		\$ 100,000		\$ 100,000	
Family Planning	\$ 5,765,185		\$ 6,020,208		\$ 5,979,357	
Hearing Screening	\$ 151,220		\$ 148,196		\$ 150,000	
Lead	\$ 807,713		\$ 890,000		\$ 602,929	
III. SUBTOTAL	\$ 9,220,986		\$ 9,040,314		\$ 8,642,989	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: TN

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,398,771	\$ 1,228,605	\$ 1,651,566	\$ 1,082,086	\$ 2,010,828	\$ 2,036,354
b. Infants < 1 year old	\$ 3,015,122	\$ 2,730,234	\$ 3,670,146	\$ 4,633,547	\$ 4,468,507	\$ 4,354,664
c. Children 1 to 22 years old	\$ 6,385,374	\$ 5,897,304	\$ 7,927,515	\$ 8,813,456	\$ 9,651,974	\$ 9,149,228
d. Children with Special Healthcare Needs	\$ 9,001,071	\$ 5,091,528	\$ 7,560,500	\$ 5,356,636	\$ 8,311,422	\$ 6,249,468
e. Others	\$ 11,283,389	\$ 11,019,211	\$ 13,469,435	\$ 6,742,227	\$ 18,052,766	\$ 7,550,173
f. Administration	\$ 1,200,000	\$ 1,335,453	\$ 2,422,297	\$ 1,117,839	\$ 2,189,568	\$ 1,988,631
g. SUBTOTAL	\$ 32,283,727	\$ 27,302,335	\$ 36,701,459	\$ 27,745,791	\$ 44,685,065	\$ 31,328,518
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 95,000		\$ 155,000		\$ 99,431	
c. CISS	\$ 109,033		\$ 159,000		\$ 188,000	
d. Abstinence Education	\$ 2,100,000		\$ 2,100,000		\$ 1,050,000	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 0		\$ 0		\$ 0	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
CHAD	\$ 1,098,700		\$ 1,098,700		\$ 1,098,700	
Hearing Screening	\$ 0		\$ 0		\$ 226,220	
Lead	\$ 0		\$ 0		\$ 528,000	
CISS/GENETICS	\$ 0		\$ 175,000		\$ 0	
HEARING SCREENING	\$ 0		\$ 151,220		\$ 0	
LEAD	\$ 0		\$ 528,000		\$ 0	
CISS/Genetics	\$ 175,000		\$ 0		\$ 0	
III. SUBTOTAL	\$ 3,577,733		\$ 4,366,920		\$ 3,190,351	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was estimated.
2. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was over estimated.
3. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was over estimated.
4. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount was over estimated.
5. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2004
Field Note:
budgeted amount was over estimated.
6. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount was over estimated.
7. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was over estimated.
8. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2004
Field Note:
Budgeted amount was over estimated.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: TN

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 32,397,297	\$ 23,838,541	\$ 29,787,798	\$ 0	\$ 28,670,195	\$ 0
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 5,190,727	\$ 3,819,435	\$ 4,772,631	\$ 0	\$ 4,593,567	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 3,758,802	\$ 2,765,798	\$ 3,456,043	\$ 0	\$ 3,326,376	\$ 0
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 3,400,822	\$ 2,502,388	\$ 3,126,896	\$ 0	\$ 3,009,579	\$ 0
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 44,747,648	\$ 32,926,162	\$ 41,143,368	\$ 0	\$ 39,599,717	\$ 0

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: TN

TYPE OF SERVICE	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 23,470,269	\$ 19,766,891	\$ 26,571,856	\$ 20,087,953	\$ 32,351,987	\$ 22,681,847
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 3,731,999	\$ 3,167,071	\$ 4,257,369	\$ 3,218,512	\$ 5,183,468	\$ 3,634,108
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 2,679,549	\$ 2,293,396	\$ 3,082,923	\$ 2,330,646	\$ 3,753,545	\$ 2,631,596
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,401,910	\$ 2,074,977	\$ 2,789,311	\$ 2,108,680	\$ 3,396,065	\$ 2,380,967
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 32,283,727	\$ 27,302,335	\$ 36,701,459	\$ 27,745,791	\$ 44,685,065	\$ 31,328,518

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount was over estimated.
2. **Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2004
Field Note:
Note pending
3. **Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount was over estimated.
4. **Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2004
Field Note:
Note pending
5. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount was over estimated.
6. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2004
Field Note:
Note pending
7. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount was over estimated.
8. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2004
Field Note:
Note pending

FORM 6						
NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED						
<small>Sect. 506(a)(2)(B)(iii)</small>						
STATE: TN						
Total Births by Occurrence: <u>78,841</u>				Reporting Year: 2003		
Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	<u>78,841</u>	<u>100</u>	<u>60</u>	<u>7</u>	<u>7</u>	<u>100</u>
Congenital Hypothyroidism	<u>78,841</u>	<u>100</u>	<u>442</u>	<u>36</u>	<u>36</u>	<u>100</u>
Galactosemia	<u>78,841</u>	<u>100</u>	<u>130</u>	<u>29</u>	<u>29</u>	<u>100</u>
Sickle Cell Disease	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
Other Screening (Specify)						
Biotinidase Deficiency	<u>78,841</u>	<u>100</u>	<u>142</u>	<u>4</u>	<u>4</u>	<u>100</u>
Hemoglobinopathies	<u>78,841</u>	<u>100</u>	<u>131</u>	<u>45</u>	<u>45</u>	<u>100</u>
Congenital Adrenal Hyperplasia (CAH)	<u>78,841</u>	<u>100</u>	<u>251</u>	<u>4</u>	<u>4</u>	<u>100</u>
Screening Programs for Older Children & Women (Specify Tests by name)						
(1) Use occurrent births as denominator.						
(2) Report only those from resident births.						
(3) Use number of confirmed cases as denominator.						

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. Section Number: Main

Field Name: SickCellDisease_OneScreenNo

Row Name: SickCellDisease

Column Name: Receiving at least one screen

Year: 2006

Field Note:

Screening data are included in hemoglobinopathies.

2. Section Number: Other Screening Types

Field Name: Other

Row Name: All Rows

Column Name: All Columns

Year: 2006

Field Note:

Screening data for hemoglobinopathies include sickle cell disease. Of the 4 confirmed cases of biotinidase deficiency, 1 was deficient and 3 were partials.

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: TN

Reporting Year: 2004

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	39,732	16.3		0.4	83.2	0.1
Infants < 1 year old	88,595	23.0		0.7	76.1	0.2
Children 1 to 22 years old	334,859	29.0		1.7	69.3	0.0
Children with Special Healthcare Needs	6,125	91.0		6.0	3.0	0.0
Others	154,189	15.7		4.0	79.8	0.5
TOTAL	623,500					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES**1. Section Number:** Main

Field Name: Children_0_1_TS

Row Name: Infants <1 year of age

Column Name: Title V Total Served

Year: 2006

Field Note:

Number of infants served is from the local health department data system and would include both residents, non-residents, and those who moved into the state which were age less than one. Number of infants on Form 6 are those tested in the newborn screening program.

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: TN

Reporting Year: 2004

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	78,960	53,227	17,291	264	1,457	90		6,631
Title V Served	39,732	26,816	10,516	15	212	12		2,161
Eligible for Title XIX	39,574	26,558	12,379	110	383	29		115
INFANTS								
Total Infants in State	78,441	59,663	17,176					1,602
Title V Served	88,595	59,237	24,624	36	485	9		4,204
Eligible for Title XIX	39,574	26,558	12,379	110	383	29		115

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	73,018	5,821	122	4,086	36	215	1,437	47
Title V Served	34,881	4,851						4,851
Eligible for Title XIX			39,574					
INFANTS								
Total Infants in State	72,987	5,790						5,790
Title V Served	80,805	7,790						7,790
Eligible for Title XIX			39,574					

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2006
Field Note:
Title XIX data are for 2003. 2004 data are not available.
2. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTotal_All
Row Name: Total Infants in State
Column Name: Total All Races
Year: 2006
Field Note:
Number of infants served is from the local health department data system and includes both residents, non-residents, and those who moved into the state which were less than one year of age.
3. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleV_All
Row Name: Title V Served
Column Name: Total All Races
Year: 2006
Field Note:
Data on infants served by Title V include both residents and non-residents and those persons moving into the state and receiving services.
4. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2006
Field Note:
Title XIX data are for 2003; 2004 data are not available.
5. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_NotReported
Row Name: Eligible for Title XIX
Column Name: Ethnicity Not Reported
Year: 2006
Field Note:
Title XIX data are not available by ethnicity.
6. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_TotalNotHispanic
Row Name: Total Infants in State
Column Name: Total Not Hispanic or Latino
Year: 2006
Field Note:
These data are actual numbers from the birth certificate system rather than from population projections.
7. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_NotReported
Row Name: Eligible for Title XIX
Column Name: Ethnicity Not Reported
Year: 2006
Field Note:
Title XIX data are not available by ethnicity.

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: TN

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 428-2229	(800) 428-2229	(800) 428-2229	(800) 428-2229	(800) 428-2229
2. State MCH Toll-Free "Hotline" Name	TN Baby Line	TN Baby Line	TN Baby Line	TN Baby Line	TN Baby Line
3. Name of Contact Person for State MCH "Hotline"	Deana Vaughn	Deana Vaughn	Lori Materi-Yopp	Lori Materi	Lori Materi
4. Contact Person's Telephone Number	(615) 741-0370	(615) 741-0370	(615) 741-0224	(615) 741-0224	(615) 741-0224
5. Number of calls received on the State MCH "Hotline" this reporting period	0		59	65	166

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: TN

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

FORM NOTES FOR FORM 9
None
FIELD LEVEL NOTES
None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2006
[SEC. 506(A)(1)]
STATE: TN

1. State MCH Administration:
(max 2500 characters)

Maternal and Child Health, within the Bureau of Health Services in the Tennessee Department of Health, consists of two sections: Child and Adolescent Health and Children's Special Services and Women's Health/Genetics. Services in Child and Adolescent Health include Home Visiting programs, Adolescent Health, Abstinence Only Education, SIDS, Early Childhood Comprehensive Systems Planning, School Health, Child Fatality Review, Child Care Resource and Referral Centers, EPSDT, and Childhood Lead Poisoning Prevention. Services for CSHCN (called Children Special Services) include: medical and other health needs; care coordination/case management; and a Parent Support Network (PEP). The Women's Health/Genetics section includes comprehensive family planning services; prenatal care, adolescent pregnancy prevention, perinatal regionalization, women's health, newborn screening follow-up, newborn hearing screening follow-up, and the network of the genetics and sickle cell centers.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 12,349,717
3. Unobligated balance (Line 2, Form 2)	\$ 9,000,000
4. State Funds (Line 3, Form 2)	\$ 13,250,000
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 5,000,000
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 39,599,717

9. Most significant providers receiving MCH funds:

Rural and metro health department clinics
Genetics and Sickle Cell Centers
Community-based agencies
Teaching hospitals

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	39,732
b. Infants < 1 year old	88,595
c. Children 1 to 22 years old	334,859
d. CSHCN	6,125
e. Others	154,189

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

Direct services, provided statewide through health department clinics and nonprofit agencies, include pregnancy testing, family planning, nutrition services, immunizations and well child visits, EPSDT screenings, follow-up and referral. The number of EPSDT screenings done in local health departments has greatly increased over the past two years. All EPSDT screenings for children in state custody are done in health department clinics. Enabling services concentrate on access to care, care coordination, home visiting services, and newborn screening follow-up. In selected areas, prenatal care and primary care are available. The care coordination component of CSS and the PEP Program provide special support and enable families to better meet their child's needs in a complex health care environment. Statewide home visiting services provide intensive services for pregnant women and families of infants and toddlers that emphasize education, parent support, infant stimulation, assessment and referral to assure that children are healthy, free from child abuse, and ready for school. The HUGS home visiting program has significantly expanded services, providing assistance with health care, social and educational needs. New EPSDT efforts include the statewide community outreach initiative and a Call Center.

b. Population-Based Services:
(max 2500 characters)

Child Fatality Teams in 31 judicial districts review all deaths of children under age 18 and make reports of recommendations for prevention efforts. The state child fatality review team reviews reports from the local teams, analyzes statistics of the incidence and causes of child deaths, and makes recommendations to the Governor and the General Assembly to promote the safety and well being of children. The State Team's recommendation to expand the availability of autopsies for unexplained child deaths passed the General Assembly this past session. The Childhood Lead Poisoning Prevention Program works to identify children with elevated blood lead levels and to educate citizens and health care providers, with the goal of preventing childhood lead poisoning. The Newborn Hearing Screening Program educates providers and birthing facilities about the importance of screening all newborns, encourages universal screening, collects data on screening results, and refers for follow-up. All birthing hospitals in the state currently provide hearing screening before discharge. Seventy-nine (out of 89) facilities reported hearing screening results on the state metabolic/genetics blood slip. The documented follow-up rate for those infants referred was 82 percent. The Genetics and Newborn Screening Program has a strong network of tertiary level providers for referral, case management and treatment of infants and children with genetic and metabolic diseases, including sickle cell. The state has expanded the testing program and currently is screening for 34 diseases which reflects 50 different genetic disorders.

c. Infrastructure Building Services:
(max 2500 characters)

Regional and County Health Councils operate in all 95 counties to assess needs and gaps, develop plans, seek resources, and implement strategies for action. Many of the targeted activities are for the MCH populations. The Tennessee Birth Defects Registry (TBDR) originated as a legislative requirement for the Tennessee Department of Health to maintain an ongoing statewide program for monitoring birth defects. The registry has continued to increase the number of years of data. The Department has established an Immunization Registry which combines data from both the public and private sectors in an electronic format. The system permits primary care providers (PCP) to access case specific information to assure that an infant or child's immunizations are up to date. Tennessee has a statewide network of Child Care Resource and Referral Centers each of which has a child care health consultant (CCHC). The centers provide technical assistance, training, consultation, and resources to child care providers to improve the health and safety of child care.

12. The primary Title V Program contact person:

Name	Dr. Theodora Pinnock
Title	Director of MCH
Address	425 5th Avenue North, 5th Floor
City	Nashville
State	TN
Zip	37347-4701
Phone	(615) 741-7353
Fax	(615) 741-1063
Email	Theodora.Pinnock@state.tn.us
Web	

13. The children with special health care needs (CSHCN) contact person:

Name	Greg Yopp
Title	Director, Children's Special Services
Address	425 5th Avenue North, 5th Floor
City	Nashville
State	TN
Zip	37247-4701
Phone	(615) 741-7353
Fax	(615) 741-1063
Email	Gregory.Yopp@state.tn.us
Web	

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: TN

PERFORMANCE MEASURE # 01

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	_____	100	100	100	100
Annual Indicator	_____	100.0	100.0	100.0	100.0
Numerator	_____	78,318	139	140	209
Denominator	_____	78,318	139	140	209
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	_____	90	92	94.5	96
Annual Indicator	_____	56.2	58.0	59.3	59.3
Numerator	_____	3,384	3,506	3,703	3,703
Denominator	_____	6,022	6,044	6,244	6,244
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	70	70	70	70	70
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data					
	2000	2001	2002	2003	2004
Annual Performance Objective		90	92	94.5	96
Annual Indicator		55.9	57.0	60.0	60.0
Numerator		3,366	3,445	3,746	3,746
Denominator		6,022	6,044	6,244	6,244
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	75	75	75	75	75
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data					
	2000	2001	2002	2003	2004
Annual Performance Objective		90	92	94.5	96
Annual Indicator		57.6	58.0	62.0	62.0
Numerator		3,469	3,506	3,871	3,871
Denominator		6,022	6,044	6,244	6,244
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	75	75	75	75	75
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	_____	90	92	94.5	96
Annual Indicator	_____	76.0	78.0	80.0	80.0
Numerator	_____	4,577	4,714	4,995	4,995
Denominator	_____	6,022	6,044	6,244	6,244
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	90	90	90	90	90
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	_____	90	92	94.5	96
Annual Indicator	_____	8.2	25.0	25.0	25.0
Numerator	_____	494	1,511	1,561	1,561
Denominator	_____	6,022	6,044	6,244	6,244
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	50	50	50	50	50
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	87.7	91	92	90	94
Annual Indicator	88.2	87.6	85.6	78.4	77.2
Numerator	198,296	66,734	61,258	55,881	60,040
Denominator	224,825	76,180	71,563	71,277	77,773
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	95	95	95	95	95
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	32	32	30	27	24
Annual Indicator	33.4	29.2	28.2	27.8	26.3
Numerator	3,760	3,412	3,225	3,203	3,057
Denominator	112,575	116,707	114,412	115,376	116,426
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	23	23	23	23	23
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	17	17	17	17	17
Annual Indicator	13.4	14.8	9.3	9.3	22.0
Numerator	10,728	11,864	6,476	6,476	35,059
Denominator	79,917	80,000	69,314	69,314	159,359
Is the Data Provisional or Final?				Provisional	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	25	25	25	25	25
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	7.1	4.5	4.1	3.7	3
Annual Indicator	4.9	4.9	5.3	4.0	4.2
Numerator	57	58	62	48	50
Denominator	1,165,848	1,176,633	1,180,216	1,188,005	1,196,148
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	3	3	3	3	3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 11

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	57.3	60	62	62	63
Annual Indicator	58.4	59.2	61.4	62.0	62.0
Numerator	46,451	46,364	47,544	48,881	49,345
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	64	64	64	64	64
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	85	85	88	98	98
Annual Indicator	69.0	84.4	95.0	97.0	97.0
Numerator	53,655	66,100	73,561	76,476	77,202
Denominator	77,761	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	98	98	98	98	98
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	<u>2</u>	<u>3</u>	<u>2.8</u>	<u>7</u>	<u>7</u>
Annual Indicator	<u>4.9</u>	<u>4.0</u>	<u>7.0</u>	<u>7.5</u>	<u>10.8</u>
Numerator	<u>71,561</u>	<u>55,941</u>	<u>103,121</u>	<u>119,428</u>	<u>173,220</u>
Denominator	<u>1,460,442</u>	<u>1,398,521</u>	<u>1,473,157</u>	<u>1,592,371</u>	<u>1,603,892</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>7</u>	<u>7</u>	<u>7</u>	<u>7</u>	<u>7</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 14

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	<u>92</u>	<u>92</u>	<u>94</u>	<u>100</u>	<u>100</u>
Annual Indicator	<u>96.4</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
Numerator	<u>623,846</u>	<u>555,961</u>	<u>786,407</u>	<u>782,057</u>	<u>775,232</u>
Denominator	<u>647,253</u>	<u>555,961</u>	<u>786,407</u>	<u>782,057</u>	<u>775,232</u>
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 15

The percent of very low birth weight infants among all live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	1.5	1.5	1.6	1.5	1.5
Annual Indicator	1.7	1.7	1.7	1.7	1.4
Numerator	1,329	1,347	1,355	1,343	1,129
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	1.4	1.4	1.4	1.4	1.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	8.2	8	7.5	7	6.5
Annual Indicator	9.6	10.0	8.7	6.2	10.3
Numerator	36	40	35	25	42
Denominator	376,371	398,800	401,132	404,366	407,744
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	6	6	6	6	6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	80	79	79.5	80	80
Annual Indicator	78.9	74.3	73.0	74.8	72.3
Numerator	1,049	1,001	989	1,004	815
Denominator	1,329	1,347	1,355	1,343	1,128
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	80	80	80	80	80
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	86	87	88	89	90
Annual Indicator	81.4	80.5	80.4	80.6	80.4
Numerator	64,775	63,016	62,274	63,551	64,000
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	90	90	90	90	90
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 1

After implementation of folic acid education at the state, regional, and local levels, reduce the number of neural tube defects births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	62	27	26	25	24
Annual Indicator					
Numerator	26	29	28	34	27
Denominator	79,539		0	0	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	23	22	22	22	22
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 2

Reduce to no more than 4% elevated blood lead levels in children 6-72 months of age who are screened.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	4%	5	7	5	4
Annual Indicator	10.1	2.4	2.0	0.4	0.5
Numerator	1,263	648	811	199	262
Denominator	12,553	26,614	40,466	51,595	49,547
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2	2	1	1	1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 3

Reduce the percentage of high school students using tobacco (cigarettes and smokeless tobacco).

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	35		35		30
Annual Indicator	41.3		32.4	27.6	27.6
Numerator	4,113		3,226	515	515
Denominator	9,959		9,959	1,865	1,865
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective		28		26	26
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 4

Reduce the percentage of high school students using alcohol.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	40		40		38
Annual Indicator	44.2		41.1	41.1	41.1
Numerator	610		797	772	772
Denominator	1,381		1,940	1,878	1,878
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective		36		34	34
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 5

Reduce the incidence of maltreatment of children younger than age 18 including physical, sexual, emotional abuse and neglect to a rate no more than 8 per 1,000.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	8	7.8	7.6	7.4	7.2
Annual Indicator	7.6	6.5	6.0	7.1	10.5
Numerator	11,123	9,571	8,853	10,106	15,143
Denominator	1,460,442	1,473,157	1,473,157	1,427,042	1,437,424
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	7.0	7	7	7	7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 6

Reduce the number of HIV infected infants to no more than one per year

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	5	2	1	1	0
Annual Indicator			In,fin,ity	In,fin,ity	In,fin,ity
Numerator	4	5	8	5	2
Denominator			0	0	0
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	0	0	0	0	0
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 9

Increase percentage of children with complete EPSDT annual examinations by 3 percent each year.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	40.6	42	45	59	60
Annual Indicator		48.7	57.9	56.3	68.1
Numerator		271,005	455,474	440,539	527,845
Denominator	647,253	555,961	786,407	782,057	775,232
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	80	80	80	80	80
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 10

Reduce the proportion of teens and young adults ages 15 to 24 with chlamydia trachomatis infections attending family planning clinics

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	8.7	5.4	5.3	5.2	5.2
Annual Indicator	5.5	5.4	4.8	6.7	6.6
Numerator	1,847	1,955	1,147	1,589	1,809
Denominator	33,692	36,285	23,799	23,685	27,494
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	5.2	5.2	5.2	5.2	5.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 11

None

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2002
Field Note:
Data for 2001 were incorrectly reported as all births (could not change on system). Correct data for 2001 are 161 screened, confirmed, and followed-up.
2. **Section Number:** Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2004
Field Note:
All but 11 of those screened and determined presumptive positives have been confirmed for 2004.
3. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
4. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
5. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
6. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
7. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
8. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
9. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
10. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
11. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
12. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:

- Column Name:**
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
13. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
14. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
15. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2002
Field Note:
Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.
16. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
17. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
18. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2003
Field Note:
In years prior to 2003, the level of completion was measured as 4 Dtap/3 Polio/1 MMR. For comparison's sake, the level of "4:3:1" for 2003 was 83.7%. In 2003, the criterion for completion was changed to 4:3:1:3:3:1.
19. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2002
Field Note:
Dental data on the population of third grade children who received sealants are not available and cannot be estimated. Previous data were obtained from a survey which has not been repeated. These data will begin to be collected during this fiscal year and will be available for future reporting periods.
20. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2003
Field Note:
These numbers are low because the children surveyed were our target population not a random sampling. These numbers represent the most at risk and underserved population and not indicative of the state as a whole.
21. **Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2002
Field Note:
Data are from Annie E. Casey Foundation publication.
22. **Section Number:** Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2004
Field Note:
These data are estimates.
23. **Section Number:** State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2002
Field Note:
This measure has been restated for 2001 forward to capture the number of NTD births rather than a rate or percentage. When the State's Birth Defects Registry is

operational, it is expected that the number will be higher.

24. Section Number: State Performance Measure #1

Field Name: SM1

Row Name:

Column Name:

Year: 2003

Field Note:

This measure has been restated for 2001 forward to capture the number of NTD births rather than a rate or percentage. When the State's Birth Defects Registry is operational, it is expected that the number will be higher.

25. Section Number: State Performance Measure #1

Field Name: SM1

Row Name:

Column Name:

Year: 2004

Field Note:

This measure was restated in 2001 to capture the number of neural tube defects from the birth certificate system rather than calculate a rate or percentage.

26. Section Number: State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2002

Field Note:

The Tennessee Youth Tobacco Survey is done every other year.

27. Section Number: State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2003

Field Note:

The 2003 Youth Risk Behavior Survey was the source

28. Section Number: State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2004

Field Note:

2003 Youth Behavioral Risk Surveillance Survey

29. Section Number: State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2002

Field Note:

The Youth Risk Behavior Survey is completed every other year by the Department of Education.

30. Section Number: State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2003

Field Note:

The Youth Risk Behavior Survey was done in 2003

31. Section Number: State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2004

Field Note:

The Youth Behavioral Risk Surveillance Survey is done every other year. The next set of data will come in 2005

32. Section Number: State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2004

Field Note:

The DCS numbers are based on the date that the investigation is completed and classified. The numbers do not necessarily reflect the year that the abuse and/or neglect took place. Therefore, the dramatic increase in the 2004 numbers is due mainly to the department's concerted effort to eliminate investigation backlogs. The backlog has reduced substantially and is expected to be caught up by the end of 2005. DCS reports that counting by the classification date allows for a more consistent accounting. If they reported by the incident date, then the numbers for all the years would continue to change and would be fluid. This accounting system allows for consistency. Once the case backlogs are caught up, it is expected that the victim count will stabilize and provide a more accurate assessment of trends from year to year.

33. Section Number: State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2002

Field Note:

The State is reporting cases only. The denominator is not applicable for this measure.

34. Section Number: State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2003

Field Note:

The State is reporting cases only. The denominator is not applicable for this measure.

35. Section Number: State Performance Measure #6

Field Name: SM6
Row Name:
Column Name:
Year: 2004
Field Note:
The State is reporting cases only. The denominator is not applicable for this measure.

36. **Section Number:** State Performance Measure #7
Field Name: SM7
Row Name:
Column Name:
Year: 2002
Field Note:
Data are no longer available for this performance measure.

37. **Section Number:** State Performance Measure #7
Field Name: SM7
Row Name:
Column Name:
Year: 2003
Field Note:
Data are no longer available for this performance measure.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: TN

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	8	7.9	7.8	7.7	7.6
Annual Indicator	9.0	8.7	9.4	9.2	8.6
Numerator	719	680	727	726	685
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	7.5	7.5	7.5	7.5	7.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	2.3	2.3	2.2	2.2	2.1
Annual Indicator	2.7	2.4	2.6	2.6	2.5
Numerator	18.1	16.2	18.4	17.9	17.5
Denominator	6.6	6.7	7.1	7	7
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2.1	2.1	2.1	2.1	2.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	4.8	4.7	4.6	4.5	4.4
Annual Indicator	5.9	5.6	5.9	6.0	5.4
Numerator	466	436	456	472	430
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	4.3	4.3	4.3	4.3	4.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	3.2	3	2.9	2.8	2.7
Annual Indicator	3.2	3.1	3.5	3.2	3.2
Numerator	253	244	271	256	255
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2.6	2.6	2.6	2.6	2.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	8.6	8.7	8.6	8.5	8.4
Annual Indicator	10.9	7.5	7.6	8.1	9.1
Numerator	869	594	593	641	726
Denominator	79,942	78,685	77,766	79,217	79,976
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	8.3	8	8	8	8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	27	24	21	18	18
Annual Indicator	27.1	22.6	24.5	23.9	22.3
Numerator	296	249	271	266	249
Denominator	1,090,721	1,104,068	1,105,061	1,111,232	1,117,907
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	20	20	15	15	15
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 12

None

FIELD LEVEL NOTES

None

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: TN

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

3

Total Score: 18

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: TN FY: 2006

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Reduce the number of premature births.
2. Reduce child abuse and neglect.
3. Reduce tobacco use by adolescents.
4. Reduce alcohol use by adolescents.
5. Improve Tennessee's EPSDT screening rates for children.
6. Improve Tennessee's EPSDT screening rates for adolescents.
7. Reduce the STD infection rates including chlamydia infection in adolescents.
8. Reduce the number of overweight and obese children and teens.
9. Reduce the number of pregnant women who smoke.
10. Improve the number of youth with special health care needs who transition successfully to adulthood.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: TN

APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	Other If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	No technical assistance is requested at this time.	No technical assistance is requested at this time.	No technical assistance is requested at this time.
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

Tennessee is not asking for technical assistance at this time.

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: TN

SP # 1

PERFORMANCE MEASURE:

After implementation of folic acid education at the state, regional, and local levels, reduce the number of neural tube defects births.

STATUS:

Active

GOAL

After folic acid / nutrition education has been operational at the local, regional, and state levels, the number of neural tube defects births will decrease each calendar year.

DEFINITION

Implementation of statewide folic acid education should impact the number of infants born with a neural tube defect.

Numerator:

The number of neural tube defects births reported by the State's birth certificate system for the calendar year.

Denominator:

NA

Units: **Text:**

HEALTHY PEOPLE 2010 OBJECTIVE

Reduce the occurrence of spina bifida and other NTDs. Target: 3 new cases/10,000.

DATA SOURCES AND DATA ISSUES

State's Birth Certificate System

SIGNIFICANCE

The Centers for Disease Control and Prevention estimates up to 70 percent of the neural tube defects can be prevented when a woman supplements her diet with folic acid.

SP # 2

PERFORMANCE MEASURE:

Reduce to no more than 4% elevated blood lead levels in children 6-72 months of age who are screened.

STATUS:

Active

GOAL

To reduce the number of children ages birth to 6 years with confirmed elevated blood lead levels greater than 10ug/dL to no more than 4% of children screened.

DEFINITION

Numerator:

The number of children with elevated blood lead levels.

Denominator:

The number of children screened for blood lead poisoning.

Units: 100 **Text:**

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Reports from laboratories collected by the Tennessee Childhood Lead Poisoning Prevention Program

SIGNIFICANCE

Childhood lead poisoning is a major preventable environmental health problem. Children with elevated blood lead levels are at risk for learning, behavior and physiologic problems.

SP # 3

PERFORMANCE MEASURE:

Reduce the percentage of high school students using tobacco (cigarettes and smokeless tobacco).

STATUS:

Active

GOAL

To decrease the number of high school students using any form of tobacco.

DEFINITION

The number of high school students using any form of tobacco.

Numerator:

Number of high school students using tobacco (cigarettes and smokeless tobacco) each year.

Denominator:

Total number of high school age students who took the Tennessee Youth Tobacco Survey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Tennessee Youth Tobacco Survey

SIGNIFICANCE

Tobacco is identified as a "gateway" drug often leading to experimentation and/or use of other substances known to be harmful to young people. With the recent court settlement with the tobacco companies, and known long term harmful affects of tobacco use on the health status and premature death of the users and persons experiencing second hand smoke. Tennessee will target a reduction in tobacco use by teens.

SP # 4

PERFORMANCE MEASURE:

Reduce the percentage of high school students using alcohol.

STATUS:

Active

GOAL

To reduce the percentage of high school students using alcohol.

DEFINITION

The number of high school students using alcohol as a percentage of the number completing the survey.

Numerator:

The number of high school students who had at least one drink of alcohol on one or more of the past 30 days.

Denominator:

The number of high school students taking the YRBS survey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Youth Risk Behavior Survey

SIGNIFICANCE

The State has established two sources of data regarding teen substance use and abuse. The Youth Behavior Risk Survey and a special survey conducted by the Bureau of Alcohol and Drugs in the Tennessee Department of Health. While prior studies indicate that use of these substances changes periodically, any use is prohibited by law and thought to be seriously harmful to young people. Our goal is to reduce substance use by adolescents in Tennessee.

SP # 5

PERFORMANCE MEASURE:

Reduce the incidence of maltreatment of children younger than age 18 including physical, sexual, emotional abuse and neglect to a rate no more than 8 per 1,000.

STATUS:

Active

GOAL

To reduce the incidence of maltreatment of children younger than age 18 including physical, sexual and emotional abuse and neglect to no more than the rate of 8 per 1000.

DEFINITION

Numerator:

The number of children younger than age 18, who are victims of indicated abuse and neglect.

Denominator:

The total number of children under age 18 in a given year.

Units: 1000 **Text:**

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Reports from the Department of Children's Services Child Protective Services Section.

SIGNIFICANCE

Children must be free from abuse and neglect in order to be healthy both physically and emotionally. Maternal and Child Health programs such as home visiting have proven to be effective in reducing abuse and neglect.

SP # 6

PERFORMANCE MEASURE:	Reduce the number of HIV infected infants to no more than one per year
STATUS:	Active
GOAL	To reduce the number of HIV infected infants (status reported by year of birth) to no more than one case per year.
DEFINITION	Due to the low incidence of HIV infected infants in a given year, only the actual cases will be reported. Numerator: Denominator: Units: 1 Text: Births

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES	Communicable Disease Reporting System, Tennessee Department of Health
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SIGNIFICANCE

SP # 9

PERFORMANCE MEASURE:

Increase percentage of children with complete EPSDT annual examinations by 3 percent each year.

STATUS:

Active

GOAL

To increase the percentage of children with complete EPSDT annual examinations each year.

DEFINITION

The number of children enrolled in TennCare, ages 0 - 21 years, having had an annual examination each year.

Numerator:

The number of children receiving EPSDT annual examinations

Denominator:

Number of children ages 0 - 21 years whom are eligible for EPSDT each year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

TennCare

SIGNIFICANCE

SP # 10

PERFORMANCE MEASURE:

Reduce the proportion of teens and young adults ages 15 to 24 with chlamydia trachomatis infections attending family planning clinics

STATUS:

Active

GOAL

Reduce chlamydia trachomatis infections among teens and young adults ages 5 to 24 years (per 100) attending family planning clinics.

DEFINITION

Numerator:

Number of teens and young adults identified with chlamydia trachomatis attending family planning clinics.

Denominator:

Total number of teens and young adults tested for chlamydia trachomatis in family planning clinics.

Units: 100 **Text:** percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Region IV Chlamydia Screening project, STD Surveillance System

SIGNIFICANCE

The Region IV chlamydia project tracks positivity rates for those clients tested in the project. In Tennessee, all teens and young adults attending family planning clinics are tested for chlamydia. This measure has been changed from SP#8 to reflect the data being collected and to state the method being used to track changes in the population. Past years data have been included for the new measure.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: TN

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	41.9	39.9	46.7	39.0	58.6
Numerator	1,569	1,511	1,786	1,508	2,288
Denominator	374,880	378,252	382,389	386,315	390,312
Is the Data Provisional or Final?				Final	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	NaN	55.0	63.0	62.0	77.5
Numerator	0	21,459	28,877	28,443	38,116
Denominator	0	39,017	45,837	45,876	49,159
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	NaN	NaN	NaN	0	
Numerator	0	0	0		
Denominator	0	0	0		
Is the Data Provisional or Final?				Provisional	

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	79.1	78.6	78.3	78.5	78.5
Numerator	62,466	61,135	60,302	61,564	61,783
Denominator	78,967	77,787	76,965	78,433	78,696
Is the Data Provisional or Final?				Final	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 07

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	35.2	35.2	35.3	43.7	51.4
Numerator	39,217	39,217	54,648	63,239	72,563
Denominator	111,276	111,276	154,863	144,621	141,136
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	45.0	100.0	100.0	100.0	100.0
Numerator	2,290	21,233	21,233	18,909	19,097
Denominator	5,088	21,233	21,233	18,909	19,097
Is the Data Provisional or Final?				Final	Final

FORM NOTES FOR FORM 17

None

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2002
Field Note:
Data for children hospitalized for asthma are from the State's Hospital Discharge System using primary diagnosis for the count.
2. **Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2002
Field Note:
The data for 1998 and 2000 were not obtainable.
3. **Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2003
Field Note:
The data for 2000 were not obtainable.
4. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2002
Field Note:
The State does not have a SCHIP program like other states. All children are enrolled as medicaid-eligible, uninsured or uninsurable under the TennCare program.
5. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2003
Field Note:
Tennessee does not have a separate SCHIP program. All children are enrolled as Medicaid-eligible, uninsured or uninsurable under the TennCare program
6. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2004
Field Note:
Tennessee does not have a separate SCHIP program. All children are enrolled as Medicaid-eligible, uninsured or uninsurable under the TennCare program
7. **Section Number:** Health Systems Capacity Indicator #07
Field Name: HSC07
Row Name:
Column Name:
Year: 2002
Field Note:
Data for 1998 was not obtainable.
8. **Section Number:** Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2002
Field Note:
The CSS Program in 2001 changed the method of contacting children under 16 years of age receiving SSI benefits. The CSS Program now contacts by letter all children under 16 receiving SSI benefits.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: TN

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2003	Matching data files	<u>11.4</u>	<u>0</u>	<u>9.4</u>
b) Infant deaths per 1,000 live births	2003	Matching data files	<u>11.2</u>	<u>0</u>	<u>9.2</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2003	Matching data files	<u>74.8</u>	<u>0</u>	<u>80.6</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2004	Other	<u>0</u>	<u>0</u>	<u>78.5</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)
STATE: TN

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2004	<u>185</u>
b) Medicaid Children (Age range <u>1</u> to <u>5</u>) (Age range <u>6</u> to <u>19</u>) (Age range <u> </u> to <u> </u>)	2004	<u>133</u> <u>100</u> <u> </u>
c) Pregnant Women	2004	<u>185</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (SCHIP ELIGIBILITY LEVEL)
STATE: TN

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2004	<u>185</u>
b) Medicaid Children (Age range <u>1</u> to <u>5</u>) (Age range <u>6</u> to <u>19</u>) (Age range <u> </u> to <u> </u>)	2004	<u>133</u> <u>100</u> <u> </u>
c) Pregnant Women	2004	<u>185</u>

FORM NOTES FOR FORM 18

The State does not have a SCHIP program separate from the TennCare/Medicaid program.

FIELD LEVEL NOTES

1. **Section Number:** Indicator 05
Field Name: LowBirthWeight
Row Name: Percent of ow birth weight (<2,500 grams)
Column Name:
Year: 2006
Field Note:
Data on the non-Medicaid population are not available.
2. **Section Number:** Indicator 05
Field Name: InfantDeath
Row Name: Infant deaths per 1,000 live births
Column Name:
Year: 2006
Field Note:
Data on the non-Medicaid population are not available. Medicaid infant mortality rate is for 2002; staff are still working to link files to obtain 2003.
3. **Section Number:** Indicator 05
Field Name: CareFirstTrimester
Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester
Column Name:
Year: 2006
Field Note:
Data on the non-Medicaid population are not available.
4. **Section Number:** Indicator 05
Field Name: AdequateCare
Row Name: Percent of pregnant women with adequate prenatal care
Column Name:
Year: 2006
Field Note:
The Kotelchuck index is not calculated on the Medicaid data. Data on the non-Medicaid population are not available.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: TN

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	No
Annual linkage of birth certificates and WIC eligibility files	2	No
Annual linkage of birth certificates and newborn screening files	1	No
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	No
Annual birth defects surveillance system	3	No
Survey of recent mothers at least every two years (like PRAMS)	1	No

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: TN

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Other:		

HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity
(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Pediatric Nutrition Surveillance System (PedNSS)	3	No
WIC Program Data	3	No
Other:		

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: TN

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	9.2	9.2	9.2	9.4	9.0
Numerator	7,352	7,235	7,124	7,409	7,189
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	7.6	7.5	7.5	7.6	7.3
Numerator	5,855	5,679	5,641	5,811	5,602
Denominator	77,142	75,891	75,103	76,347	76,335
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.7	1.7	1.7	1.7	1.7
Numerator	1,329	1,347	1,355	1,343	1,343
Denominator	79,539	78,318	77,433	78,841	79,590
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.4	1.3	1.4	1.3	1.1
Numerator	1,044	1,022	1,020	1,008	827
Denominator	77,142	75,891	75,103	76,347	76,335
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	13.6	12.6	12.2	12.0	12.4
Numerator	158	148	144	143	148
Denominator	1,165,848	1,176,633	1,180,216	1,188,005	1,196,148
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	6.0	4.9	5.3	4.5	4.8
Numerator	70	58	62	53	57
Denominator	1,165,848	1,176,633	1,180,216	1,188,005	1,196,148
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	44.0	42.0	40.3	35.8	41.1
Numerator	344	331	320	287	332
Denominator	781,529	788,264	794,061	800,933	808,140
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	12,451.4	12,866.5	13,203.9	13,248.6	13,209.1
Numerator	145,164	151,391	155,834	157,394	158,000
Denominator	1,165,848	1,176,633	1,180,216	1,188,005	1,196,148
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	884.9	896.6	909.3	916.9	911.3
Numerator	10,317	10,550	10,732	10,893	10,900
Denominator	1,165,848	1,176,633	1,180,216	1,188,005	1,196,148
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	3,531.8	3,699.8	3,798.6	3,590.9	3,588.5
Numerator	27,602	29,164	30,163	28,761	29,000
Denominator	781,529	788,264	794,061	800,933	808,140
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	28.2	27.4	26.9	31.8	33.2
Numerator	5,154	5,334	5,332	6,259	6,594
Denominator	182,778	194,369	197,974	196,796	198,363
Is the Data Provisional or Final?				Final	Final

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	5.9	5.9	6.4	8.0	8.6
Numerator	5,998	6,345	6,721	8,421	9,035
Denominator	1,011,332	1,067,315	1,054,929	1,049,746	1,047,782
Is the Data Provisional or Final?				Final	Final

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2004
Field Note:
These data, which are from the hospital discharge dataset, are not yet available for 2004. These are estimates.
2. **Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2004
Field Note:
Hospital discharge data for 2004 are not available; these are estimates.
3. **Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2004
Field Note:
Hospital discharge data for 2004 are not available; these are estimates.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: TN

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? Yes Is this data final or provisional? Provisional

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	78,441	59,663	17,176					1,602
Children 1 through 4	311,871	237,670	67,910					6,291
Children 5 through 9	394,899	301,351	86,194					7,354
Children 10 through 14	410,937	313,342	91,105					6,490
Children 15 through 19	407,744	315,019	86,058					6,667
Children 20 through 24	400,396	313,357	78,406					8,633
Children 0 through 24	2,004,288	1,540,402	426,849	0	0	0	0	37,037

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	75,007	3,434	0
Children 1 through 4	297,668	14,203	0
Children 5 through 9	378,742	16,157	0
Children 10 through 14	399,540	11,397	0
Children 15 through 19	394,736	13,008	0
Children 20 through 24	381,883	18,513	0
Children 0 through 24	1,927,576	76,712	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: TN

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	184	60	105	0	1	0		18
Women 15 through 17	3,057	1,658	1,096	8	11	1		283
Women 18 through 19	6,970	4,464	1,940	11	28	5		522
Women 20 through 34	60,860	43,797	11,410	106	1,064	67		4,416
Women 35 or older	7,890	6,055	1,145	15	238	1		436
Women of all ages	78,961	56,034	15,696	140	1,342	74	0	5,675

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	169	15	0
Women 15 through 17	2,761	290	6
Women 18 through 19	6,399	557	14
Women 20 through 34	56,238	4,530	92
Women 35 or older	7,451	429	10
Women of all ages	73,018	5,821	122

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: TN

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	686	396	274	3	0	4		9
Children 1 through 4	105	77	26	0	0	1		1
Children 5 through 9	52	38	14	0	0	0		0
Children 10 through 14	90	65	25	0	0	0		0
Children 15 through 19	377	296	75	0	0	1		5
Children 20 through 24	514	375	133	0	1	1		4
Children 0 through 24	1,824	1,247	547	3	1	7	0	19

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	655	31	0
Children 1 through 4	98	7	0
Children 5 through 9	48	4	0
Children 10 through 14	85	4	1
Children 15 through 19	362	13	2
Children 20 through 24	484	28	2
Children 0 through 24	1,732	87	5

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: TN

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	1,603,892	1,227,045.0	348,443.0					28,404.0	2004
Percent in household headed by single parent	30.0							30.0	2004
Percent in TANF (Grant) families	9.0	36.1	63.2	0.1	0.5	0	0.1	0	2004
Number enrolled in Medicaid	693,553							693,553.0	2004
Number enrolled in SCHIP	693,553							693,553.0	2004
Number living in foster home care	9,359							9,359.0	2004
Number enrolled in food stamp program	373,071							373,071.0	2004
Number enrolled in WIC	200,187	117,106.0	63,670.0		963.0	22.0		18,426.0	2004
Rate (per 100,000) of juvenile crime arrests	2,132.9							2,132.9	2004
Percentage of high school drop-outs (grade 9 through 12)	11.3							11.3	2004

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	1,545,693.0	58,199.0		2004
Percent in household headed by single parent			30.0	2004
Percent in TANF (Grant) families	98.0	2.0		2004
Number enrolled in Medicaid			693,553.0	2004
Number enrolled in SCHIP			693,553.0	2004
Number living in foster home care			9,359.0	2004
Number enrolled in food stamp program			373,071.0	2004
Number enrolled in WIC	181,761.0	18,426.0		2004
Rate (per 100,000) of juvenile crime arrests			2,132.9	2004
Percentage of high school drop-outs (grade 9 through 12)			11.3	2004

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: TN

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	0
Living in urban areas	1,090,647
Living in rural areas	513,245
Living in frontier areas	0
Total - all children 0 through 19	1,603,892

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: TN

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	5,666,991.0
Percent Below: 50% of poverty	5.7
100% of poverty	13.8
200% of poverty	33.0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: TN

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,603,892.0
Percent Below: 50% of poverty	8.0
100% of poverty	19.0
200% of poverty	41.0

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2006
Field Note:
The data provided are from KIDS Count, are for 2001, and are the latest which could be located. The data reflect the percent of families with children which are headed by a single parent, not the percent of children.
2. **Section Number:** Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2006
Field Note:
The State does not operate a separate SCHIP program from the Medicaid/TennCare Program. Therefore, we have reported the same numbers as for Medicaid.
3. **Section Number:** Indicator 09A
Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2006
Field Note:
These WIC data are for the year 2003.
4. **Section Number:** Indicator 09A
Field Name: HSIRace_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2006
Field Note:
These data are from the Department of Justice and are for 2003.
5. **Section Number:** Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2006
Field Note:
These data are from 2003, the latest which could be located.
6. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2006
Field Note:
These data are for the year 2001 and are from KIDS Count.
7. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2006
Field Note:
The State does not operate a SCHIP program separate from TennCare. Therefore, we have reported the same numbers as for Medicaid.
8. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2006
Field Note:
These data are for the year 2003.
9. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2006
Field Note:
Data are for 2003 and from the Department of Justice.
10. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2006
Field Note:
These data are for 2003.
11. **Section Number:** Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2006
Field Note:
Data for urban and metropolitan areas cannot be separated.
12. **Section Number:** Indicator 10
Field Name: Urban

Row Name: Living in urban areas

Column Name:

Year: 2006

Field Note:

Data for urban and metropolitan areas cannot be separated.

13. **Section Number:** Indicator 11

Field Name: S11_total

Row Name: Total Population

Column Name:

Year: 2006

Field Note:

Data are from the 2003 American Community Survey.

14. **Section Number:** Indicator 11

Field Name: S11_50percent

Row Name: Percent Below: 50% of poverty

Column Name:

Year: 2006

Field Note:

Data are from the 2003 American Community Survey.

15. **Section Number:** Indicator 11

Field Name: S11_100percent

Row Name: 100% of poverty

Column Name:

Year: 2006

Field Note:

Data are from the 2003 American Community Survey.

16. **Section Number:** Indicator 11

Field Name: S11_200percent

Row Name: 200% of poverty

Column Name:

Year: 2006

Field Note:

Data are from the 2003 American Community Survey.

17. **Section Number:** Indicator 12

Field Name: S12_50percent

Row Name: Percent Below: 50% of poverty

Column Name:

Year: 2006

Field Note:

Data for percent of children below 50% of poverty are from the KIDS Count data book and are for the year 2001.

18. **Section Number:** Indicator 12

Field Name: S12_100percent

Row Name: 100% of poverty

Column Name:

Year: 2006

Field Note:

Data are from the National Center for Children in Poverty and are for 2003.

19. **Section Number:** Indicator 12

Field Name: S12_200percent

Row Name: 200% of poverty

Column Name:

Year: 2006

Field Note:

Data are from the National Center for Children in Poverty and are for 2003.

NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: TN

SP # 1

PERFORMANCE MEASURE:

Reduce the percentage of high school students using tobacco (cigarettes and smokeless tobacco).

GOAL

To decrease the number of high school students using any form of tobacco.

DEFINITION

The number of high school students using any form of tobacco.

Numerator:

Number of high school students using tobacco (cigarettes and smokeless tobacco) each year.

Denominator:

Total number of high school age students who took the Tennessee Youth Tobacco Survey.

Units: 100 **Text:** 1

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Tennessee Youth Tobacco Survey

SIGNIFICANCE

Tobacco is identified as a "gateway" drug often leading to experimentation and/or use of other substances known to be harmful to young people. With the recent court settlement with the tobacco companies, and known long term harmful affects of tobacco use on the health status and premature death of the users and persons experiencing second hand smoke. Tennessee will target a reduction in tobacco use by teens.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 2

PERFORMANCE MEASURE:

Reduce the percentage of high school students using alcohol.

GOAL

To reduce the percentage of high school students using alcohol.

DEFINITION

The number of high school students using alcohol as a percentage of the number completing the survey.

Numerator:

The number of high school students who had at least one drink of alcohol on one or more of the past 30 days.

Denominator:

The number of high school students taking the YRBS survey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Youth Risk Behavior Survey

SIGNIFICANCE

The State has established two sources of data regarding teen substance use and abuse. The Youth Behavior Risk Survey and a special survey conducted by the Bureau of Alcohol and Drugs in the Tennessee Department of Health. While prior studies indicate that use of these substances changes periodically, any use is prohibited by law and thought to be seriously harmful to young people. Our goal is to reduce substance use by adolescents in Tennessee.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 3

PERFORMANCE MEASURE:

Reduce the incidence of maltreatment of children younger than age 18 including physical, sexual, emotional abuse and neglect to a rate no more than 8 per 1,000.

GOAL

To reduce the incidence of maltreatment of children younger than age 18 including physical, sexual and emotional abuse and neglect to no more than the rate of 8 per 1000.

DEFINITION

Numerator:

The number of children younger than age 18, who are victims of indicated abuse and neglect.

Denominator:

The total number of children under age 18 in a given year.

Units: 1000 **Text:**

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Reports from the Department of Children's Services Child Protective Services Section.

SIGNIFICANCE

Children must be free from abuse and neglect in order to be healthy both physically and emotionally. Maternal and Child Health programs such as home visiting have proven to be effective in reducing abuse and neglect.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 4

PERFORMANCE MEASURE:

Increase percentage of children with complete EPSDT annual examinations by 3 percent each year.

GOAL

To increase the percentage of children with complete EPSDT annual examinations each year.

DEFINITION

The number of children enrolled in TennCare, ages 0 - 21 years, having had an annual examination each year.

Numerator:

The number of children receiving EPSDT annual examinations

Denominator:

Number of children ages 0 - 21 years whom are eligible for EPSDT each year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

TennCare

SIGNIFICANCE

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 5

PERFORMANCE MEASURE:

Reduce the proportion of teens and young adults ages 15 to 24 with chlamydia trachomatis infections attending family planning clinics

GOAL

Reduce chlamydia trachomatis infections among teens and young adults ages 5 to 24 years (per 100) attending family planning clinics.

DEFINITION

Numerator:

Number of teens and young adults identified with chlamydia trachomatis attending family planning clinics.

Denominator:

Total number of teens and young adults tested for chlamydia trachomatis in family planning clinics.

Units: 100 **Text:** percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Region IV Chlamydia Screening project, STD Surveillance System

SIGNIFICANCE

The Region IV chlamydia project tracks positivity rates for those clients tested in the project. In Tennessee, all teens and young adults attending family planning clinics are tested for chlamydia. This measure has been changed from SP#8 to reflect the data being collected and to state the method being used to track changes in the population. Past years data have been included for the new measure.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 6

PERFORMANCE MEASURE:

Reduce the number of babies born prematurely.

GOAL

To reduce the number of live births born prematurely.

DEFINITION

Addressing certain known modifiable risk factors of preterm births can improve birth outcomes.

Numerator:

Number of live births with gestation less than 37 weeks in the calendar year.

Denominator:

Total number of live births in the calendar year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-11. Reduce preterm births to 7.6%. (Baseline: 11.4 in 1997)

DATA SOURCES AND DATA ISSUES

State's Birth Certificate System.

SIGNIFICANCE

Prematurity is the leading cause of neonatal mortality in the U.S. Nearly 50% of preterm births have no known causes, but certain modifiable risk factors (medical, behavioral, and environmental) can be addressed.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 7

PERFORMANCE MEASURE:

Increase percentage of adolescents with complete Early Periodic Screening, Diagnosis and Treatment(EPSDT) annual examinations by 5% each year.

GOAL

To increase the percentage of adolescents with complete EPSDT annual examinations each year.

DEFINITION

The number of teens enrolled in TennCare,ages birth to 20, having had an annual examination each year.

Numerator:

The number of teens aged birth to 20 receiving EPSDT annual examinations.

Denominator:

Number of teens ages birth to 20 whom are eligible for EPSDT examinations each year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

TennCare

SIGNIFICANCE

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 8

PERFORMANCE MEASURE:

Reduce the number of pregnant women who smoke and use illicit drugs.

GOAL

Decrease the number of pregnant women who smoke.

DEFINITION

Addressing smoking cessation with pregnant women can improve birth outcomes.

Numerator:

Number of live births where birth certificate data indicates smoking during pregnancy in the calendar year.

Denominator:

Total number of live births in calendar year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

16-17. Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women.

DATA SOURCES AND DATA ISSUES

State birth certificate system

SIGNIFICANCE

A range of effects, including spontaneous abortion, LBW, and preterm delivery, have been associated with prenatal use of licit and illicit drugs, including alcohol, tobacco, cocaine and marijuana. Tobacco is associated with LBW and spontaneous abortion.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 9

PERFORMANCE MEASURE:

Reduce the number of overweight and obese children and adolescents.

GOAL

Reduce the number of overweight and obese children and adolescents.

DEFINITION

Increasing healthy eating and physical activity among children and adolescents can reduce the number of children and adolescents who are overweight or obese.

Numerator:

2003 Tennessee Youth Risk Behavior Survey data.

Denominator:

2003 Tennessee Youth Risk Behavior data.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

19-3. Reduce the proportion of children and adolescents who are overweight or obese.

DATA SOURCES AND DATA ISSUES

2003 Tennessee Risk Behavior Survey

SIGNIFICANCE

Maintenance of a healthy weight is a major goal in the effort to reduce the burden of illness and its consequent reduction in quality of life and life expectancy. Patterns of healthful eating behavior and physical activity begins in childhood.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 10

PERFORMANCE MEASURE:

Increase the percentage of youth with special health care needs, age 14 and older, who receive formal plans for transition to adulthood.

GOAL

To increase the percentage of youth with special health care needs, age 14-21 years, who receive formal plans necessary to transition to adult health care, post high school education, work and independence.

DEFINITION

Numerator:

Number of youth in the Children's Special Services' program, age 14-21 years, who receive formal transition plans.

Denominator:

Number of youth in Children's Special Services, age 14 -21 years during the reporting period.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Related to Objective 16.23: Increase the proportion of States and jurisdictions that have service systems for children with or at risk for chronic and disabling conditions as required by Public Law 101-239.

DATA SOURCES AND DATA ISSUES

Tennessee Department of Health's client tracking and encounter system, PTBMIS, will be used to determine what services are provided to the client.

SIGNIFICANCE

The transition from youth to adulthood has become a priority issue in Tennessee. This mirrors national priorities as evidenced by the President's "New Freedom Initiative: Delivering on the Promise" (March 2002). Most children with special health care needs now live to adulthood, but are less likely than their non-disabled peers to complete high school, attend college or to be employed.

OBJECTIVE

2006	2007	2008	2009	2010
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